



UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF MICHIGAN
OFFICE OF THE CLERK
www.miwd.uscourts.gov



399 Federal Bldg.
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Grand Rapids, MI 49503
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(269) 337-5706

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315 W. Allegan St.
Lansing, MI 48933
(517) 377-1559

229 Federal Bldg.
202 W. Washington St.
Marquette, MI 49855
(906) 226-2021

March 6, 2009

Michael C. Grant
Olson Bzdok & Howard, PC
420 E. Front St.
Traverse City, MI 49686

RE: Kiessel et al v Leelanau County Sheriff Department et al
Case No. 1:09-cv-179 Hon. Janet T. Neff

Dear Mr. Grant:

In reviewing the roll of attorneys admitted to practice in this district, we are not able to locate your name. The following are requisites for an attorney to become a member of the bar of this district:

1. Petition for Admission (see attached), including completion of sponsorship section by an attorney who is admitted to practice in the Western District of Michigan;
2. An original certificate of active status and good standing issued within the last 30 days from the state of the applicant's bar membership; and
3. \$175.00 fee payable to the Clerk, U.S. District Court.

Upon receipt of the above, your application will be submitted to the Chief Judge, or his designee, for review. If the application is granted, your name will be added to the list of attorneys admitted to practice in this district, and you will receive a certificate of admission. While a petition for admission will be accepted for filing in any office, the papers are forwarded to our Grand Rapids office for processing upon receipt. To expedite the process, petitions may be sent directly to Grand Rapids.

Please be certain that you comply with all of the attorney admission requirements. Failure to comply with all of the requirements will delay the processing of your petition. Original signatures are required on all submitted paperwork (copies will not be accepted).

Prior to seeking admission, you must familiarize yourself with the Local Rules which are available on the Court's web site (www.miwd.uscourts.gov). **Pursuant to Western District of Michigan Local Civil Rule 5.7 and Local Criminal Rule 49.10, effective January 1, 2005, attorneys must register to file and serve pleadings electronically by the ECF system.** An E-Filing Registration form is attached.

If you have any questions, please contact the Court at any office listed above.

Sincerely,

Tracey Cordes, Clerk

jlg

By: Deputy Clerk

PETITION FOR ADMISSION
(Local Civil Rule 83.1/Criminal Rule 57.1)

10/19/06

**UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF MICHIGAN**

1. Name: _____
FIRST / MIDDLE / LAST

2. Firm Name: _____

Business Address: _____
ROOM / SUITE / FLOOR / BUILDING

STREET ADDRESS

CITY / STATE / ZIP

Business Telephone Number: _____

3. State Bar I.D. No. _____

4. Identify all courts in which you have been admitted to practice and dates of admission:

5. Have you ever been held in contempt of court, censured, disbarred or suspended from practice before any disciplinary authority or court? _____

If so, nature and disposition thereof: _____

6. Have you ever been convicted of any felony or misdemeanor? _____

If so, explain the facts and circumstances: _____

7. Original certificate of active status and good standing (issued within the last 30 days)
from _____ is attached.

STATE BAR

8. ☐ I am newly admitted to the State Bar of _____ and request a waiver of the
sponsorship requirement. Waiver granted _____

JUDGE'S INITIALS

9. ☐ Check payable to U.S. District Court Clerk for \$175.00 is attached.

10. ☐ I have read the Local Rules of the Western District of Michigan (available at
www.miwd.uscourts.gov).

I swear (or affirm) that the above information is accurate and correct to the best of my knowledge and belief.

DATE

SIGNATURE OF APPLICANT

Statement of a sponsoring attorney of the bar of this court, stating when the sponsoring attorney was admitted to practice in this court, under what circumstances the attorney has known the applicant, that the attorney knows the applicant to be of good character and reputation, and that the attorney believes the applicant to be well qualified as a member of the bar of this court. For applicants residing in another state, the sponsor may be a judge of a court of record of that state, or a federal judge.

SPONSORING ATTORNEY NAME

SIGNATURE OF SPONSORING ATTORNEY OR JUDGE

DATE

STATE BAR I.D. NO.

**UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF MICHIGAN**

E-FILING REGISTRATION FORM

****Please type; this will also serve as a return mailing label****

Name: _____

Firm: _____

Addr.: _____

Phone: _____

State Bar Number: _____

(and state, if not Michigan)

Date of admission to the Bar of this court: _____

****NOTE: A PACER ACCOUNT IS NECESSARY
FOR VIEWING ELECTRONIC DOCUMENTS****

This form cannot be submitted electronically.

Complete the form on-line, print a hard copy, sign it and present it to the Clerk's office at the address below. A login and password for access to the electronic case filing system will be issued to you upon receipt of the fully-completed form. **All of this information is required and must be supplied, including your original signature.**

Primary e-mail address: _____
(Attorney's e-mail for electronic service)

Secondary e-mail address: _____
(Central repository, Secretary, etc.)

E-mail software used: _____
(i.e., Outlook, Groupwise, etc.)

☐ I have an existing PACER account.

☐ My firm has an existing PACER account.

☐ I already have an ECF login that I use in _____, which is _____;
(Name of Other District) (Login)
please assign the same login for my use in the Western District of Michigan.

The information contained in this box will be used for security/confirmation purposes related to your e-filing login/password:

Key word/phrase: _____ Reminder: _____

BY COMPLETING THIS FORM, ATTORNEYS CERTIFY THAT THEY ARE MEMBERS IN GOOD STANDING OF THE BAR OF THIS COURT AND THAT THEY ARE FAMILIAR WITH W.D. Mich. LCivR 5.7 and LCrR 49.10, AS APPLICABLE TO THEIR PRACTICE, WHICH MAY BE FOUND AT:

www.miwd.uscourts.gov

By registering under this rule, attorneys consent to electronic service of all electronically filed documents. See W.D. Mich. LCivR 5.7(i)(ii) and LCrR 49.10(h)(ii).

Attorney's Signature: _____

Return this form **via hand delivery**
or via U.S. mail only to:

**Clerk, U.S. District Court
E-Filing Registration
399 Federal Building
110 Michigan St., N.W.
Grand Rapids, MI 49503**

**YOUR E-FILING LOGIN AND PASSWORD
WILL BE SENT TO YOU VIA U.S. MAIL**

COURT USE ONLY:

E-Filing Login Assigned: _____

E-Filing Password Assigned: _____

☐ Confirmation e-mail sent

☐ E-mail confirmed by attorney

☐ Attorney's record updated

☐ UR registered e-mail sent

☐ Copy of form mailed to attorney